2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000126907

BRAZELL PAINTING, INC.



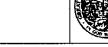
FILED ———
May 03, 2007 08:00 A
Secretary of State

Principal Place of Business

1927 SOUTH 14TH STREET

PMB #125

FERNANDINA BEACH, FL 32034



DO NOT WRITE IN THIS SPACE

Mailing Address

POST OFFICE BOX 611 FERNANDINA BEACH, FL 32035

> CR2E034 (11/05) 04302007 No Chg-P Applied For 4. FEI Number 01-0802022

5. Certificate of Status Desired

Not Applicable \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RAUER, LANNY M **501 CENTRE STREET SUITE 101**

FERNAND	INA BEACH, FL 32034			The Company of the North Company of the Company of		S SPAC	, E	
	named entity submits this statement for the pions of registered agent.	urpose of changing its register	ed office or re	egistered agent, o	or both, in the	State of Florida.	l am familiar with	, and accept
SIGNATURE -	Signature, typed or printed name of registered agent and title if	f applicable. (NOTE: Registere	d Agent signature	required when reinstatin	g)	D	ATE	
FIL After Ma	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		\$5.00 May Bo Added to Fees	e			
10.	OFFICERS AND DIREC	TORS	1, ".	* * * * * * * * * * * * * * * * * * * *	edie .		· · · , . · ·	
ITLE IAME STREET ADDRESS SITY-ST-ZIP	D BRAZELL, JOHN POST OFFICE BOX 611 FERNANDINA BEACH, FL 32034		alef g ^M ,			U000007	58180	
ITLE IAME STREET ADDRESS STY-ST-ZIP					0!	5/23/07-8	ŎĬŎŽ <u>-</u> 004	150.00
ITLE IAME STREET AODRESS CITY-ST-ZIP				D (O NC	T WRI	TE	
TITLE NAME STREET ADDRESS SITY-ST-ZIP				IN	THI	S SPA	CE	
ITLE IAME STREET ADDRESS CITY-ST-ZIP				·		i		
ITLE						•		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP